| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
|  |  |  |  |
| FEE DETERMINATION |  |  |  |
| O.I.P.E. CLASSIFIER |  | 45 | 2-8-10 |
| FORMALITY REVIEW |  |  |  |
| RESPONSE FORMALITY REVIEW |  | . |  |
|  |  |  |  |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| − (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |



BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)